2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 19, 2007 08:00 A Secretary of State DOCUMENT # P00000095556 1. Entity Name EASTWIND YACHTS, INC. Principal Place of Business Mailing Address 4451 NE 29TH AVE. 4451 NE 29TH AVE. LIGHTHOUSE PT., FL 33064 LIGHTHOUSE PT., FL 33064 04162007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1044142 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MORAN, PAUL J DO NOT WRITE 4451 NE 29TH AVE. LIGHTHOUSE PT., FL 33064 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10 TITLE MORAN, PAUL J NAME STREET ADDRESS 4451 NE 29TH AVENUE CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064 STD TITLE MORAN, TRACEY NAME STREET ADDRESS 4451 NE 29TH AVENUE CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-7/P TITLE NAME STREET ADDRESS City-St-7iP

Paul J. Moran

NO TYPES OR SHITTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/07

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